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Bib Data Sheet

CONFIRMATION NO. 4903

<b>SERIAL NUMBER</b> 10/705,272	<b>FILING OR 371(c) DATE</b> 11/08/2003 <b>RULE</b>	<b>CLASS</b> 348	<b>GROUP ART UNIT</b> 2622	<b>ATTORNEY DOCKET NO.</b> 100111143-1
<b>APPLICANTS</b> Robert P. Cazier, Fort Collins, CO; <b>** CONTINUING DATA *****</b> <i>None</i> <b>** FOREIGN APPLICATIONS *****</b> <i>None</i> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 02/11/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Signature</i> Examiner's Signature <i>Signature</i> Initials <i>Initials</i>		<b>STATE OR COUNTRY</b> CO	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 20
			<b>INDEPENDENT CLAIMS</b> 5	
<b>ADDRESS</b> 22879				
<b>TITLE</b> Volume control linked with zoom control				
<b>FILING FEE RECEIVED</b> 942	<b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	